# Navy Personnel Research and Development Center



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# Effects of Loma Prieta Earthquake on Navy Members and Families

Elyse W. Kerce Gerry Wilcove



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#### **FOREWORD**

This report presents the results of an earthquake experiences survey conducted among Navy personnel and spouses who were in the San Francisco Bay Area during the 1989 Loma Prieta Earthquake. It is focused on the psychological effects of post-traumatic stress, rather than on the physical impact of the earthquake.

This effort has been funded under the Quick Response Program (Program Element 0603701N, Work Unit Number 63701N-R1771) and was requested by the Navy Family Support Program (PERS-66) and Commander, Naval Base San Francisco.

We wish to acknowledge the assistance of the staff at the Family Service Center, Treasure Island and the many volunteers who assisted in the distribution of survey materials.

JULES BORACK Director, Personnel Systems



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#### **SUMMARY**

#### **Problem**

The effects of natural disasters are not limited to property damage but have psychological, behavioral, and physical effects on individuals. However, little is known about:

- · Long-term effects.
- The cumulative impact of disaster-related stress in conjunction with the unique conditions of Navy life, such as family separation and the absence of enduring community ties.
  - The effect of the disaster on organizational outcomes, via its impact on personnel.
  - What can be done by the Navy to minimize post-traumatic stress effects on Navy families.

# **Objective**

This effort was initiated to examine the utilization and effectiveness of services available to Navy members and their families in the area of the 1989 Loma Prieta Earthquake; and to assess the psychological, behavioral, and physical symptoms experienced as a result of the disaster. It was further intended to determine if the earthquake affected readiness of commands based in the earthquake area.

# Approach

A survey questionnaire was developed and administered to members of Navy commands in the San Francisco Bay Area and to spouses residing in military housing at Naval Station, Treasure Island; Naval Air Station, Alameda; Naval Supply Center, Oakland; Hamilton Air force Base; and Point Mulati. Survey data were supplemented by interviews with selected command leaders and service providers. Respondents were asked to indicate their needs, assistance received, services utilized and service satisfaction, and the psychological and physical symptoms experienced by them and their family members following the earthquake. Military respondents were grouped by marital and parental status, spouse respondents by parental status and deployment status of their military spouse. Coping strategies were factor-analyzed and reduced to four coping styles. A prior stress index was computed by weighting stress-producing events in the individual's life over the previous year. The relationships among prior stress, coping style, family situation, and symptoms experienced were examined.

#### **Findings**

- 1. Spouses reported more symptoms and needs and utilized services more than military members.
- 2. Thirty-nine percent of the military respondents and 61 percent of the spouses reported experiencing some stress-related psychological or physical symptoms. Difficulty sleeping and general anxiety were the most common symptoms.

- 3. Services used most frequently were related to physical assistance, such as those provided by the Public Works Center (PWC), or the food and other necessities supplied by the command. Less than 10 percent of the respondents utilized the psychological services available to them.
- 4. The principal need expressed by both military members and spouses was "someone to talk to."
- 5. Among military members, those in the married and divorced/separated groups reported more symptoms at 2 weeks than did single individuals. Seven months after the earthquake, married members had fewer symptoms than single or divorced/separated members.
- 6. Spouses of military members who were deployed at the time of the earthquake reported experiencing more personal symptoms than spouses of members who were not deployed. Parental status did not affect the number of personal symptoms experienced.
- 7. The most frequent post-earthquake family problem reported by military members was that their spouses had become less supportive of a Navy career. Among spouses, the family problem reported most often was marital conflicts.
- 8. Coping style was shown to have a significant effect on the number of symptoms experienced. Individuals who sought support from informal sources (e.g., friends and extended family) were more likely to experience symptoms than individuals who employed other coping styles (i.e., support from formal sources, avoidance, or active/self-sufficient coping), and their symptoms were more likely to persist.
- 9. Spouse age was related to the number of personal symptoms, with the younger group more likely to experience stress-related symptoms. The number of children in the household was related to the number of children's symptoms reported by spouses.
- 10. The majority of military members did not feel that their own performance or morale was affected by the earthquake and command leaders who were interviewed generally concurred.
- 11. Military members and command leaders both perceived a minimal impact on unit readiness due to the earthquake; however, command leaders found that recall bills were frequently out-of-date and inadequate.
- 12. Provisions for communications between members at sea and dependents in the disaster area were frequently inadequate.

#### Discussion

Many respondents who experienced psychological and physical symptoms following the traumatic event of the earthquake did not seek or utilize the services available to them. However, those who did obtain assistance from formal sources (i.e., agencies, programs, counselors) reported fewer symptoms at 2 weeks and again at 7 months than those who utilized informal sources of support. When services were used, they were most likely to be related to physical assistance (emergency food or PWC), rather than to counseling services designed to assist members and their families in dealing with anxiety and other related symptoms. This suggests either an unawareness

of available services or an unwillingness to ask for help. Well-publicized disaster preparation programs should be initiated that address such topics as anticipated emotional reactions and where to obtain assistance, and special efforts should be made to reach high-risk groups.

In general, results from spouse and member surveys supported the conclusions of the service providers concerning the individuals most at risk for experiencing post-traumatic stress symptoms. For example, both data sources indicated that spouses and children of deployed members are likely to be particularly vulnerable. Also, younger spouses among the respondents experienced more stress-related symptoms and reported children's problems of longer duration following the earthquake than those in older age brackets.

Spouses of all ages reported feeling anxious when separated from family members and this anxiety was continuing after 7 months for 22 percent of the sample. This finding may underlie members' reports that their spouses had become less supportive of their Navy careers following the earthquake. The difficulties in communication between deployed members and their families may also be a contributing factor. Because of communications difficulties, spouses were frequently unable to discuss the situation with the military spouse and members were not able to ascertain the safety of their family. The ombudsman network has a vital role to play in facilitating such communications, but many ombudsmen have had no training in disaster-response procedures. Adding to communications problems was the fact that recall bills, meant to provide home address and telephone numbers for command members, were frequently out-of-date and inaccurate.

#### Recommendations

- 1. Develop and initiate disaster preparation education programs that address such topics as anticipated emotional reactions and where to obtain assistance.
  - 2. Utilize out-reach strategies to reach those in high-risk populations.
- 3. Include provisions for helping children express their fears and anxieties in disaster response plans and educating their parents in the best ways to deal with children's fears and anxieties.
  - 4. Provide command ombudsmen with recall bills that are kept up-to-date by commands.
  - 5. Provide training in disaster response procedures for ombudsmen.

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#### INTRODUCTION

#### **Problem**

The effects of natural disasters are not limited to property damage but have psychological, behavioral, and physical effects on individuals. Disaster-related stresses may be greater for Navy personnel and their families due to unique aspects of Navy life, such as family separation and the absence of enduring community ties, and little is known about long-term effects. Considerably less is known about how such stress affects organizational outcomes or what can be done to minimize effects on Navy families.

# **Objectives**

This effort was initiated to examine the utilization and effectiveness of services available to Navy members and their families in the area of the 1989 Loma Prieta earthquake; and to assess the psychological, behavioral, and physical symptoms experienced as a result of the disaster. It was further intended to determine how the earthquake affected readiness of commands based in the earthquake area.

#### **Background**

The Loma Prieta earthquake, with a magnitude of 7.1 on the Richter scale, struck on 17 October 1989, causing 62 known deaths, more than 3,000 injuries, and over \$8 billion damage in Northern California. It has been speculated that casualties would have been greater except for a combination of fortuitous circumstances. The earthquake occurred shortly after 5:00 p.m. so that schools were closed and children were home. The early hour scheduled for commencement of the World Series baseball game meant that many commuters left work earlier than was normal and thousands of spectators had already made their way to the stadium where there was virtually no damage. In addition, weather conditions were optimum and there was minimum disruption of communications.

Within the military community, two deaths and two serious injuries were documented. Damage to naval shore installations geographically located within the area of responsibility assigned to the Commander, Naval Base San Francisco was approximately \$175 million. Particularly hard hit were Naval Station Treasure Island and Naval Air Station Alameda due to liquefaction of sandy landfills. Damage to the Oakland Bay Bridge severely limited vehicular access to and from Naval Station Treasure Island.

Although the main shock of the earthquake lasted for a matter of seconds, aftershocks continued at frequent intervals for several days. An aftershock of 5.0 magnitude occurring 33 hours after the main shock exacerbated damages, particularly at Naval Air Station Alameda and Naval Station Treasure Island. After 21 days, 87 aftershocks of a magnitude of 3.0 or higher had been recorded.

Civilian medical authorities in the San Francisco Bay Area reported that 25,000 cases of Post-traumatic Stress Disorder were receiving counseling and assistance as of January 1990, and

Navy surport staff estimated that significant numbers of military personnel and their families experienced both immediate trauma response reactions and delayed stress reactions.

The Navy Personnel Research and Development Center (NPRDC) was requested to investigate the psychological, behavioral, and physical effects of the Loma Prieta earthquake on Navy members and their families, and to assess the availability, utilization of, and satisfaction with support services provided.

#### **APPROACH**

#### Military and Spouse Samples

The military sample was drawn from commands based in the San Francisco Bay Area. Command participation in the study was solicited by administrative message from Commander, Naval Base (COMNAVBASE) San Francisco, directed to 16 of 20 commands in the area, asking the commands to provide a point of contact (POC) for survey administration. One of those commands had not been in the area during the earthquake; the remaining commands agreed to participate in the survey. Boxes of questionnaires were delivered to POCs for distribution to command members who were present in the area at the time of the earthquake. A total of 5,081 surveys were delivered to participating commands at their request. However, the number of questionnaires actually distributed to members was 4,432 because several of the commands had overestimated the number of their members who had been in the Bay Area during the earthquake. Another 272 were returned without being completed because they had been mistakenly distributed to recipients who had not been in the area at the time of the earthquake. Thus, a total of 4,160 individuals (4,432 minus 272) who had been in the Bay Area during the earthquake received surveys. Of these individuals, 2,544 returned surveys for a response rate of 61 percent. Survey results pertain to the sample of respondents obtained in the study and may or may not generalize to all military members in the Bay Area.

Spouse surveys were mailed to military housing areas at Naval Station (NAVSTA) Treasure Island, Naval Air Station (NAS) Alameda, Naval Supply Center (NSC) Oakland, Hamilton Air Force Base (AFB), and Point Mulati. These spouses lived in 3,749 of the 3,947 housing units in the area. Mailing labels were generated by the regional housing office and were directed to addresses rather than to individuals. A total of 212 surveys could not be delivered and were returned unopened because the unit in question had become vacant. Another 128 surveys were returned without being completed because the recipient had arrived in the Bay Area after the earthquake. Thus, 3,409 spouse surveys were mailed. A total of 793 were completed and returned, for a response rate of 23 percent. Survey results pertain to the sample of respondents obtained in the study and may or may generalize to all Navy spouses in the Bay Area.

Members of both the military and spouse samples were informed that a similar questionnaire might have been completed by his or her spouse and were encouraged to complete the questionnaire nevertheless.

#### **Procedure**

Because of administrative considerations, the survey could not be conducted until April 1990, approximately 7 months after the earthquake occurred. This was a disadvantage in that respondents had to rely on memory for describing their psychological and physical symptoms in the period immediately after the earthquake. On the other hand, the delay made it possible to assess stress symptoms of longer duration.

Surveys were shipped from NPRDC to the Family Service Center (FSC) at NAVSTA Treasure Island, where volunteers helped assemble the materials and prepare envelopes for mailing. FSC staff members also actively participated in contacting commands and arranging for delivery of survey materials.

Data collected through the survey were supplemented by interviews with leaders (either Commanding Officer or Executive Officer) of five commands based in the area and with 22 support services staff members. Interviews were conducted by NPRDC researchers approximately 8 months after the earthquake occurred.

# **Survey Instruments**

A survey questionnaire was developed to assess the extent of psychological and physical symptoms experienced by Navy members and their families following the Loma Prieta earthquake. The questionnaire also solicited information about damages and injuries sustained, support services used, satisfaction with services, unmet needs, earthquake preparation, and demographic background. In addition, respondents were asked to provide a personal history of stressful life events in the preceding year and to indicate the coping strategies they employed following the earthquake. Military respondents were also asked how they thought their morale and performance, and that of their commands, had been affected by earthquake-related trauma.

Separate versions of the questionnaire were prepared for Navy military members and Navy spouses. If the individual receiving a questionnaire was not residing in the San Francisco area at the time of the earthquake, he or she was requested to write "No" across the face of the questionnaire and mail it back. Copies of the surveys are included as Appendix A.

#### **Analysis**

Responses received from the military and spouse samples were analyzed separately throughout. The majority of the items were included in both surveys and, for those items, descriptive summaries for the two samples are presented side-by-side. However, this is not intended to imply that the results are based on data received from married couples. The military sample was divided into analysis groups on the basis of marital and parental status, while spouse respondents were grouped by parental status and whether or not the member spouse was deployed when the earthquake occurred. Analysis of variance procedures were used to investigate whether reports of psychological and physical symptoms varied by analysis group.

Following the initial compilation of response frequencies and descriptive statistics, several summary variables were constructed for use in subsequent analyses. A prior stress index was

computed as a weighted sum of stressful life events in the previous year. Events and the weights assigned to them were adapted from the Holmes and Rahe (1967) Life Stress Scale. This index was used in a subsequent multiple regression analysis to help determine if prior events were related to the ways in which individuals reacted to the emotional stress of the earthquake.

Coping strategies selected by respondents from a list of 17 possibilities were entered into a factor analysis to determine if they could be reduced to a smaller number of factors or coping styles. A four-factor solution was found to account for 42 percent of the variance in coping strategies for the military respondents and 36 percent of the variance among spouse respondents. Results of the factor analysis are included in Appendix B, Tables B-1 and B-2. The resulting factors have been labeled Style 1: Support from Formal Sources, Style 2: Active/Self-sufficient Coping, Style 3: Support from Informal Sources, and Style 4: Avoidance.

Table 1 is provided as an outline of the variables used in analyses presented in the following sections.

Table 1
Summary of Variables Used in Analysis

Independent Variables	Dependent Variables
Demographics:	Personal symptoms at 2 weeks
Age	Personal symptoms at 7 months
Education	· ·
Gender	Family problems at 2 weeks
Race	Family problems at 7 months
Marital status	
Number of children	Children's symptoms at 2 weeks
Housing area	Children's symptoms at 7 months
Paygrade	
Deployment Status	Military Sample Only
Earthquake injury (to self and family)	Earthquake-related absenteeism
Earthquake damage sustained	Effects on morale (self and command)
Earthquake disruption of services	Effects on performance (self and command)
Availability of support services	
Support services used	
Satisfaction with support services	
Substitution with depposit described	
Post-earthquake communication	
Time stationed in Bay Area	
Presence of relatives in Bay Area	
Intimacy of normal social interactions	
Family needs following earthquake	
Assistance with needs	
Assistance with needs	
Coping style	
Number of coping strategies used	
Prior stress events	
Earthquake preparation	
Crisis training	

#### **RESULTS**

## **Description of Respondents**

## **Military Respondents**

Eighty-three percent of the military respondents were male, ranging in age from 17 to 58 with an average age of 28 years. The enlisted/officer distribution was 89 percent and 11 percent, respectively, with 60 percent of the total military sample in paygrades E-4 through E-6. More than half (57 percent) were currently assigned to sea duty, and 20 percent reported that they were deployed when the earthquake occurred.

Table 2 shows the distribution of the military sample by marital and parental status. Among married respondents, approximately 9 percent had a military spouse. Approximately 42 percent of the sample were parents, with a total of 2,029 children among them.

Table 2

Distribution of Military Sample by Marital and Parental Groups

Group	Percent of Sample		
Single, no children	38.8		
Single, with children	2.7		
Married, no children	16.4		
Married, with children	36.1		
Divorced/separated/widowed, no children	2.9		
Divorced/separated/widowed, with children	3.0		

Almost two-thirds of the military respondents lived off-base in civilian housing, as contrasted with spouse respondents, all of whom lived in military housing

# **Spouse Respondents**

Although this sample was composed primarily of women, 15 percent of the respondents were male, and 20 percent were themselves military personnel. Spouses ranged in age from 18 to 55, with an average age of 32. Thirty-one percent reported that the military member in the household was deployed at the time of the earthquake. Table 3 shows the distribution of the spouse sample by parental status and deployment of military spouse. As the table indicates, 85 percent of the spouses responding were parents, with a collective total of 1,435 children. Sixtynine percent of their children were under the age of 11.

Table 3

Distribution of Spouse Sample by Parental Groups and Deployment Status

Group	Percent of Sample
No children, member not deployed	10.1
No children, member deployed	4.6
Children, member not deployed	58.8
Children, member deployed	26.5

# **Earthquake Injuries and Damages**

Respondents were asked to report on both major injuries and those they considered to be minor, and on both major and minor damage to their residences or personal property. Injuries were almost entirely minor, with only three injuries that were considered "major" reported by the military sample, and one reported by the spouse sample. The summary presented in Table 4 represents all reported injuries or damage, regardless of severity.

Table 4

Percent Reporting Earthquake Injury or Damage

	Spouse Respondents (N = 793) (%)	Militay Respondents $(N = 2,544)$ $(%)$	
Injury to self or family member	17	1	
Damage to residence or personal property	51	34	

# Disruption of Transportation and Utility Services

Transportation throughout the Bay Area was affected by earthquake damage to bridges and roads. Survey respondents were asked if the normal mode of transportation for themselves or their spouses had been disrupted. Forty-three percent of the military sample and 54 percent of the spouse sample responded affirmatively.

The loss of utilities was reported by respondents from each of the naval housing communities in the area. Commands sought to minimize the hardships associated with utility service disruptions by bringing in mobile support equipment, such as electric generators, potable water containers, and portable showers. Table B-3 summarizes the extent of disruption by housing area, as reported by military and spouse respondents (see Appendix B.)

#### Communication

Overall, 32 percent of member respondents and 73 percent of spouse respondents were able to determine that their family members were safe vithin the first hour after the earthquake. However, among members who were deployed at the time of the earthquake, 46 percent stated that more than 36 hours elapsed before they were able to establish communications with their families in the affected area. Fifty-six percent of spouses of deployed members stated that more than 36 hours elapsed before communication was established. Ombudsmen from area commands played a major role in communications efforts, but were frequently hampered by having out-of-date information.

# **Utilization and Satisfaction with Support Services**

Respondents were presented with a list of 19 support services and asked to indicate if the service was available, if they had used that service, and how satisfied they were with each service used. In general, spouses tended to report higher utilization than did the military sample; however, even among spouses, a relatively small percentage reported using any individual service. Fifty-four percent of spouse respondents and 81 percent of military respondents indicated that they did not use any services. Among military respondents, utilization was not significantly different between those who were and were not deployed when the earthquake occurred.

Table 5 summarizes responses from both samples regarding the use of services, the perceived non-availability of services, and mean satisfaction scores for services used. As the table indicates, utilization as reported by spouses tended to be higher for each of the services than utilization reported by the military sample. Services used most frequently by both groups were emergency food and supply services, the ombudsman network, Base Security, and the Public Works Center. Despite the fact that the provision of emergency food and supplies was one of the services used most frequently, it was also reported as one that was frequently unavailable. Rap workshops for family members and structured activities for school-aged children were other services frequently perceived to be unavailable.

# **Unmet Needs of Navy Members and Spouses**

To determine if the services provided in the post-earthquake period were relevant to the needs expressed by members and spouses, respondents were presented with a list of 10 needs and asked to select those applicable to them or their family. They were further instructed to indicate if assistance had been obtained in meeting those needs. The need expressed most frequently was "someone to talk to," which was indicated by 33 percent of the spouse sample and 14 percent of the military sample. Other needs and the percentages of individuals that reported them are presented in Table 6 for both samples.

Table 5

Utilization, Non-availability, and Mean Satisfaction with Support Services

	ŀ	Military Respond	ents	Spouse Respondents			
Support Service	% Used	% Not Avail.	Mean Satis.*	% Used	% Not Avail.	Mean Satis.*	
Rap workshops for family members	2	7	2.89	2	8	3.05	
Emergency food/supplies from command	7	6	3.21	22	6	3.56	
FSC information and referral	4	3	3.19	11	1	3.14	
Red Cross	6	2	3.27	7	1	2.77	
FSC counseling services	2	2	3.19	4	1	2.85	
Federal Emergency Management Agency	2	3	3.00	1	2	3.00	
Navy Relief	2	2	3.14	2	1	3.15	
Structured activities for children	2	4	3.08	5	5	3.55	
Emergency supplies from other sources	4	3	3.26	11	3	3.52	
Chaplains	3	2	3.28	4	1	3.24	
Church relief agencies	2	2	3.10	1	2	3.31	
Psychological services from other commands	1	3	3.03	3	1	3.21	
Ombudsman network	7	2	3.15	17	2	3.06	
Stress management workshops	2	3	3.04	2	3	2.91	
City agencies	2	3	3.06	1	2	3.07	
County agencies	2	2	3.02	1	2	3.00	
Base security	7	2	3.27	15	0	3.33	
Fire department	5	2	3.43	10	0	3.56	
Public Works Center	10	2	3.15	20	1	3.18	

<sup>\*</sup>Means were computed on a 4-point scale where 4 = very satisfied, 1 = very dissatisfied.

Table 6

Post-earthquake Needs Expressed by Military and Spouse Respondents and Percent Obtaining Assistance

	_	Respondents 2544)	Spouse Respondents $(N = 793)$		
Need	Expressed Need (%)	Obtained Assistance (%)	Expressed Need (%)	Obtained Assistance (%)	
Someone to talk to	14	12	33	22	
Assistance with cleaning up damage at home	3	2	6	4	
Assistance with home repair	4	3	10	8	
Transportation assistance	7	5	16	12	
Assistance in communicating with spouse	6	3	17	8	
Child care	2	1	8	4	
Therapy for children	1	1	5	2	
Temporary financial assistance	2	1	3	1	
Personal counseling	2	1	6	2	
Family or marital counseling	1	1	3	1	

The table also indicates the percentage who obtained assistance in dealing with a particular need. In each case, the percentage who obtained assistance was lower than the number expressing a need. These data do not necessarily indicate that assistance was not available, but only that assistance was not obtained. For example, of the 90 spouses who expressed a need for "someone to talk to" in the post-earthquake period and who did not obtain assistance, 65 indicated they did not attend the rap groups conducted, but only 17 of those said that such rap groups were not available. Similarly, 78 percent of that group did not use FSC counseling services, but only two said that such services were not available.

# **Psychological and Physical Symptoms**

# **Military Respondents**

Thirty-nine percent of the military respondents reported that, during the first 2 weeks after the earthquake, they experienced psychological and physical symptoms listed in the questionnaire. Seven months after the earthquake, the number of military respondents who reported that they were experiencing any of the symptoms had dropped to 11 percent.

Analysis of variance revealed that the number of symptoms experienced was related to marital status (F2,2444 = 12.47, p = .000) and deployment status at the time of the earthquake (F1,2444 = 28.70, p = .000). Married respondents reported significantly (t2509 = -3.33, p = .001) more symptoms at 2 weeks than did single members or divorced/separated members. Those who were deployed in October 1989 when the earthquake occurred reported fewer symptoms than those who were in the Bay Area at that time (t2486 = 5.67, p = .000). Parental status was not related to the number of personal symptoms reported by members. Refer to Appendix B, Table B-4 for a summary of this analysis.

By 7 months after the earthquake, neither marital nor parental status was associated with the number of personal symptoms experienced by military respondents. However, those who had been deployed during the earthquake continued to experience fewer symptoms (t2486 = 4.14, p = .000).

Individuals reporting 15 or more symptoms at 2 weeks were distributed among all the marital groups. At 7 months after the earthquake, nearly half of those reporting 15 or more symptoms were single respondents.

#### **Spouse Respondents**

Seventy-one percent of the spouse respondents reported that they experienced psychological and physical symptoms listed in the questionnaire during the first 2 weeks following the earthquake. After seven months, the number of spouses reporting symptoms had dropped to 43 percent.

A two-way analysis of variance was conducted to provide an overall test of group differences in the number of symptoms reported. Deployment of the military spouse was associated with the number of symptoms ( $F_{1,771} = 32.49$ , p = .000), but parental status was not. Among spouses, those whose military marital partner was deployed experienced more symptoms ( $t_{773} = -5.70$ , p = .000) than those whose partner was not deployed. Similar effects were found for both time periods. Details of this analysis are presented in a summary table in Appendix B, Table B-5.

Approximately 5 percent of the sample reported that they were experiencing more than 15 psychological and physical symptoms 2 weeks following the earthquake. Investigation revealed that 81 percent of this small, but extreme, group were parents. There was a positive correlation between the number of children and the number of symptoms experienced. However, coefficients (although significant at p < .05) were not large enough to be of practical value.

#### Symptoms Reported with Greatest Frequency

During the first 2 week ends following the earthquake, the symptom reported with greatest frequency by both military respondents and spouses was difficulty falling asleep, and sleeping through the night was also a problem frequently reported. Forty-one percent of the spouses experienced anxiety when separated from family members, a symptom which, for 21 percent of the sample, persisted over the next 7 months. Refer to Table 7 for the frequency with which all symptoms were experienced. Percentages for individual symptoms were considerably higher among the spouse respondents than among military respondents.

Table 7

Percent of Military and Spouse Respondents Reporting Various Psychological and Physical Symptoms

	•	Responsents = 2,544)	Spouse Respondents (N = 793)	
Symptom	At 2 Weeks (%)	At 7 Months (%)	At 2 Weeks (%)	At 7 Months (%)
Difficulty falling asleep	17	4	49	11
Difficulty sleeping through night	15	4	40	14
Anxious when separated from family	14	7	41	22
Fearful of returning to certain places	11	5	31	15
Feeling anxious all the time	10	3	35	14
Feeling threatened by forces beyond control	9	4	25	15
Difficulty concentrating	9	3	24	6
Not knowing what to do next	7	3	19	6
Short-tempered at work	7	4	6	2
Excessive fatigue	6	3	17	4
Trouble remembering things	5	3	14	7
Feeling guilty because others lost more	5	1	11	2
Loss of appetite	4	1	13	13
Nightmares	4	2	13	7
Nervous laughter	4	1	8	1
Short-tempered with family	4	2	16	5
Feeling angry much of the time	4	2	6	3
Decreased sexual desire	3	1	7	3
Shunning other people	3	2	5	3
Weight loss	3	1	6	2
Feeling numb, unable to relate	3	2	11	1
Feeling lethargic or apathetic	3	2	9	4
Crying for no reason at all	2	1	16	3
Large weight gain	2	2	2	3
Digestive problems	2	1	5	2
Feeling punished for something you didn't do	2	1	2	1
Feeling that you don't trust others	2	2	1	2

# Children's Symptoms and Problem Behaviors

Spouse respondents whose marital partner was deployed at the time of the earthquake reported significantly (p < .01) more problem behaviors among their children 2 weeks after the earthquake than did spouses whose marital partner had not been deployed. Furthermore, this same group continued to report more children's problems after 7 months.

Military respondents generally reported fewer children's problems than spouse respondents. Among military members, the number of children's problem behaviors did not vary by marital status (i.e., single parents did not report significantly more problems than married parents). The frequency with which children's symptoms were reported by each of the samples is provided in Table 8.

Table 8

Percent of Military and Spouse Respondents Reporting Specific Children's Symptoms

	-	Respondents = 1.068)	Spouse Respondents (N = 674)	
Symptom	At 2 Weeks (%)	At 7 Months (%)	At 2 Weeks (%)	At 7 Months (%)
Refusing to sleep in own bed	17	5	29	10
Difficulty sleeping	9	2	19	6
Frequent nightmares	9	2	19	5
Physical complaints	4	2	14	6
Refusing to leave caretaker	4	1	13	2
Crying	4	1	12	2
Refusing to go to school	2	1	8	2
Aggressive behaviors	2	1	7	5
Bed-wetting	2	1	6	2
Eating problems	2	1	5	1
Poor school performance	1	1	6	3
Tantrums	1	1	5	3
Withdrawn, passive	1	1	4	1
Difficulty getting along with family	1	1	4	3
Thumb sucking	1	1	3	2
Difficulty getting along with friends	1	1	3	1
Frequent illnesses	1	1	2	2

Note. Frequencies have been rounded to nearest percent.

# Personal and Children's Symptoms by Housing Area

Results from an analysis of symptoms by housing area appear to be consistent with the amount of damage and disruption of services which occurred at the two locations. For example, military respondents living in military housing on Treasure Island reported the greatest number of personal symptoms at 2 weeks, and again at 7 months; while those living in military housing at Hamilton AFB (where less damage was sustained) reported the fewest symptoms. Spouse respondents living on Treasure Island also reported a greater number of personal symptoms than spouses living in other military housing areas.

According to responses of military respondents, children in housing on Treasure Island also experienced more symptoms than children in other housing areas. Children of military respondents living in civilian housing had the fewest number of symptoms reported. Among the spouse respondents, those living in military housing at NAS Alameda reported more symptoms among their children, at both points in time, than did spouses living in other military housing areas. Spouse questionnaires were not mailed to civilian housing.

#### **Family Problems**

Single Navy members without children were excluded from the analysis of family problems. Percentages of military and spouse respondents reporting each of the family problems listed in the questionnaire are shown in Table 9. Among spouses, the family problem reported most frequently was an increase in marital conflicts; among military respondents, it was their perception that their spouses had become less supportive of a Navy career.

#### **Coping Behaviors**

Coping styles appeared to be relevant to an understanding of post-traumatic stress symptoms among both samples. Respondents were grouped according to their factor scores, and the coping styles adopted by military and spouse respondents in each marital and/or parental status group are also shown in Appendix B, Table B-6.

#### **Military Respondents**

The coping style employed by the largest number (37%) of military respondents was Style 1.-Support from Formal Sources. People who cope in this manner are most likely to turn to professional service providers for assistance. The avoidance style of coping with earthquake stress was more likely to be used by respondents in the youngest age categories. This coping style involves "partying with friends" and "adopting a fatalistic attitude."

A two-factor analysis of variance procedure examined differences in personal stress symptoms reported by the military respondents at 2 weeks and 7 months. This analysis revealed that both the coping style (F3,2480 = 95.69, p = .000) and respondents' marital/parental status (F5,2480 = 2.71, p = .019) made a significant contribution to the variance in stress symptoms reported at 2 weeks. Military respondents who utilized formal sources of support reported the fewest personal problems, while those who utilized informal sources of support reported the most personal problems. After 7 months, coping style continued to account for a significant

portion of the variance in the number of personal symptoms experienced (F3,2480 = 25.06, p = .000), but marital/parental status did not. Refer to Table B-7 in Appendix B for details of analysis of variance results pertaining to the coping behaviors of military respondents.

Table 9

Percent of Military and Spouse Respondents Reporting Specific Family Problems

	Milit y Respondents (N = 1,468)		Spouse Respondents (N = 793)	
Symptom	At 2 Weeks (%)	At 7 Months (%)	At 2 Weeks (%)	At 7 Months (%)
Spouse less supportive of Navy career	9	5	8	6
Family member has emotional problems	7	3	8	3
Increase in marital conflicts between husband and wife	5	3	9	4
Increased arguments between children and parents	3	1	7	3
Increased arguments among siblings	1	1	7	3
An increase in the number of problems or issues that don't get resolved	2	1	4	3
Increased difficulty with sexual relationship between husband and wife	1	1	4	3
A family member appears to depend on alcohol or drugs	1	1	2	0
Physical and/or psychological violence in the home	1	1	1	1

Note. Frequencies have been rounded to nearest percent.

Excluding single military members, a similar analysis was conducted with family problems as the dependent variable. This analysis indicated that coping style also accounted for a significant amount of variance in the number of family problems experienced at 2 weeks and at 7 months. Details are provided in Table B-9, Appendix B.

# **Spouse Respondents**

The coping style employed by the largest number (31%) of spouse respondents was an active/self-sufficient style that included making preparations for future earthquakes, helping others with earthquake damage, and talking within the family about the earthquake.

Analysis of variance procedures indicated that for spouses, as well as military respondents, the style used to cope with the earthquake trauma was associated with the number of personal symptoms. At 2 weeks after the earthquake, both coping style and the parental/deployment group contributed significantly to the variance in stress symptoms (p = .000), and the interaction of the two factors was significant at p = .02. At 7 months, neither the parental/deployment factor nor the interaction accounted for significant portions of the variance in personal symptoms of spouses. Details of these analyses are found in Table B-8 in Appendix B. Spouse respondents who indicated that their coping styles were based on support from informal sources had more personal problems at both points in time than those who employed other coping styles.

Coping style was also related to the number of family problems experienced at two weeks by the spouse respondents. As with personal problems, the group who reported the greatest number of family problems at two weeks were those whose coping style was support from informal sources. Coping style was not related to the number of family problems reported at seven months. Details of this analysis are provided in Table B-10, Appendix B.

#### **Prior Stress Index**

A prior stress index was constructed that represented the weighted sum of an individual's stress-producing events in the preceding year as reported by respondents and statistically transformed to approximate a normal distribution. It was hypothesized that stress would be cumulative and that there would be a positive relationship between prior stress and the number of symptoms experienced following the earthquake. Although this relationship was found to exist for both military and spouse respondents, prior stress accounted for only a small percentage of the variance in symptoms reported. The correlations between prior stress and each of the outcome variables are shown in Table 10.

Stress index means were not significantly different for the military and spouse samples. Among military respondents, single parents and divorced/separated groups with and without children reported higher prior stress levels than did the married groups or singles without children (p = .01). Among spouse respondents, there were no stress-index differences associated with parental status or deployment of the military spouse.

# **Predicting Post-traumatic Stress Symptoms**

A series of stepwisc multiple regressions were performed primarily to investigate whether post-traumatic symptoms could be predicted on the basis of marital/parental status (dichotomized) or other demographic variables. Analyses were conducted for each of six dependent variables: the total number of (1) personal psychological and physical symptoms, (2) children's problems, and (3) family problems at 2 weeks and 7 months following the earthquake. All dependent variables were transformed to approximate normal distributions. Groups of variables entered into the regression as predictors included demographics, prior stress, time in the area, relatives in the area, deployment, typical social interactions, earthquake damage and injury, and coping strategies. The criterion for entry was a probability of F to enter of .05.

Table 10

Correlations Between a Prior Stress Index and Personal Symptoms,
Family Problems, and Children's Symptoms

	Pric	Prior Stress		
	Military Respondents $(N = 2,544)$	Spouse Respondents (N = 789)		
Personal symptoms at 2 weeks	.26 $(p = .000)$ $(n = 2544)$	.14 $(p = .000)$ $(n = 789)$		
Personal symptoms at 7 months	.21 $(p = .000)$ $(n = 2544)$	.17 $(p = .000)$ $(n = 789)$		
Family problems at 2 weeks	.18 $(p = .000)$ $(n = 1536)$	.18 $(p = .000)$ $(n = 789)$		
Family problems at 7 months	.22 ( $p = .000$ ) ( $n = 1536$ )	.16 (p=.000) (n = 789)		
Children's symptoms at 2 weeks	.12 $(p = .000)$ $(n = 1068)$	.05 $(p = .117)$ $(n = 670)$		
Children's symptoms at 7 months	.08 $(p = .006)$ $(n = 1068)$	.16 $(p = .000)$ $(n = 670)$		

#### **Notes**

- 1. Zero-order Pearson product moment correlations.
- 2. Distributions for prior stress, personal symptoms, family problems, and childrens' symptoms have been corrected to approximate normal distributions.

Overall, the best predictors of stress symptoms were the number of coping strategies used, the prior stress index, and earthquake damage and/or injury. Among demographic variables, the most useful for predicting stress symptoms in these samples was respondents' age. Age was negatively correlated with each of the stress measures (personal, family, and children's at 2 weeks and 7 months) in the spouse sample. The variable "social interaction", which enters into the regressions for several of the dependent variables for both the military and spouse samples, was derived from the survey item that is concerned with the intimacy of typical social interactions.

#### Military Respondents

For the military sample, multiple Rs ranged from .30, for the prediction of family problems at 7 months; to .47, for the prediction of children's symptoms at 2 weeks. The results of these analyses are presented in Table 11. The singles group (i.e., never married, no children) was

excluded from the analysis of family problems and respondents without children were excluded from the analysis of children's problems. For each of the dependent variables, forced entry of additional sets of variables did not add appreciably to the amount of variance accounted for.

Table 11

Results of Multiple Regression Analyses to Predict Post-traumatic Stress Symptoms:
Military Sample

Symptom Type	Predictor Variables	Mult R*	R <sup>2</sup>	В
Personal symptoms				
at 2 weeks	Number of coping strategies	.38	.15	.42
	Prior stress index	.42	.17	.08
	Earthquake damage	.43	.19	.62
	Earthquake injury	.43	.19	.90
Personal symptoms				
at 7 months	Number coping strategies	.27	.07	.23
	Prior stress index	.31	.10	.06
	Earthquake injury	.32	.10	1.11
	Age of member	.33	.11	02
	Earthquake damage	.34	.11	.34
Family problems				
at 2 weeks	Number coping strategies	.26	.07	.18
	Earthquake damage	.29	.09	.51
	Prior stress index	.32	.10	.05
	Earthquake injury	.33	.11	1.10
Family problems				
at 7 months	Prior stress index	.28	.08	.02
	Number coping strategies	.32	.10	.05
	Earthquake injury	.29	.08	.99
	Earthquake damage	.29	.09	.25
	Age of member	.30	.09	01
Children's symptoms				
at 2 weeks	Number coping strategies	.37	.14	.32
	Earthquake damage	.43	.18	1.00
	Number of children	.46	.21	.42
	Earthquake injury	.47	.22	1.30
Children's symptoms				
at 7 months	Number coping strategies	.22	.05	.13
	Earthquake damage	.26	.07	.38
	Number of children	.28	.08	.18
	Earthquake injury	.30	.09	.99
	Social interactions	.31	.09	.13

<sup>\*</sup>All multiple Rs were significant (p < .01). Each successive predictor variable listed increased the multiple Rs significantly.

#### Notes.

<sup>1.</sup> Mult R = multiple R,  $R^2$  = variance accounted for, B = slope.

<sup>2.</sup> Distributions for personal symptoms, family problems, and children's symptoms have been corrected to approximate normal distributions.

## **Spouse Respondents**

For the spouse sample, the resulting multiple Rs ranged from .30 for the prediction of family problems at 7 months, to .50 for the prediction of personal symptoms at 2 weeks. Respondents without children were excluded from the analysis of children's problems.

As with the military sample, for all dependent variables except family problems at 7 months, the number of coping strategies employed was the initial variable entered into the equations using a stepwise procedure. Deployment of the military spouse was a predictor of personal and family problems, but not of children's problems. The prior stress index and deployment of the military spouse also figured prominently. The number of children in the family contributed to the prediction of children's symptoms. Details of this analysis are provided in Table 12.

# Earthquake Effects on Readiness, Morale, and Performance

Military members and command leaders were asked to report on three factors that might affect readiness: morale, performance, and absenteeism. Command leaders were also asked directly if they believed that the earthquake had affected command readiness.

#### **Military Respondents**

Despite transportation difficulties, 90 percent of the military members reported that they were not absent from duty on any day following the earthquake, and only 2 percent reported being absent for more than 3 days. In general, they believed that there was less effect on their own performance than on the performance of their command as a whole. The same type of pattern was found when morale was considered. In both cases, however, the majority of respondents thought that performance and morale remained "just about the same." Figure 1 shows the distribution of responses on the performance question and Figure 2 on the morale question.

#### **Command Leaders**

There was a general consensus among the command leaders interviewed that readiness was not diminished by events surrounding the earthquake; although, they did concede that some individuals were working with diminished effectiveness while attempting to deal with family problems. Command leaders' estimates of time lost was greater than that indicated by responses from Navy members. For example, at one command, only about 50 percent of command members were able to report for duty on the first day following the earthquake. Another reported that about 6 percent of their people had to go home on the first day to deal with emergencies. At several commands, the emergency situation revealed that command recall bills were sadly out-of-date.

Table 12

Results of Multiple Regression Analyses to Predict Post-traumatic Stress Symptoms:

Spouse Sample

Symptom Type	Predictor Variables	Mult R*	R <sup>2</sup>	В
Personal symptoms				
at 2 weeks	Number coping strategies	.42	.17	.49
	Earthquake damage	.44	.20	.92
	Military spouse deployed	.47	.22	.94
	Age of spouse	.48	.23	05
	Social Interactions	.49	.24	.33
	Prior stress index	.50	.25	.05
Personal symptoms				
at 7 months	Number coping strategies	.29	.09	.31
	Earthquake damage	.35	.12	1.03
	Prior stress index	.37	.14	.06
	Social interactions	.38	.15	.39
	Age of spouse	.40	.16	04
	Military spouse deployed	.41	.17	.60
Family problems				
at 2 weeks	Number coping strategies	.24	.06	.20
	Prior stress index	.30	.09	.08
	Earthquake damage	.33	.11	.59
	Military spouse deployed	.34	.11	.39
Family problems				
at 7 months	Prior stress index	.16	.03	.02
	Military spouse deployed	.21	.04	.22
	Parental category	.24	.06	.82
	Earthquake injury	.28	.08	.62
	Social interactions	.29	.09	.07
	Number of coping strategies	.30	.09	.03
Children's symptoms				
at 2 weeks	Number coping strategies	.33	.11	.35
	Number of children	.37	.13	.47
	Earthquake damage	.38	.15	.62
	Earthquake injury	.40	.16	1.46
Children's symptoms				
at 7 months	Number coping strategies	.22	.05	.14
	Prior stress index	.28	.08	.08
	Number of children	.32	.10	.35
	Earthquake injuries	.35	.12	1.52
	Earthquake damage	.37	.13	.47
	Age of spouse	.38	.14	03
	Time in Bay Area	.39	.15	.16

<sup>\*</sup>All multiple Rs were significant (p < .01). Each successive predictor variable listed increased the multiple Rs significantly.

#### Notes.

<sup>1</sup> Mult R = multiple R,  $R^2$  = variance accounted for, B = slopc.

<sup>2.</sup> Distributions for personal symptoms, family problems, and children's symptoms have been corrected to approximate normal distributions.

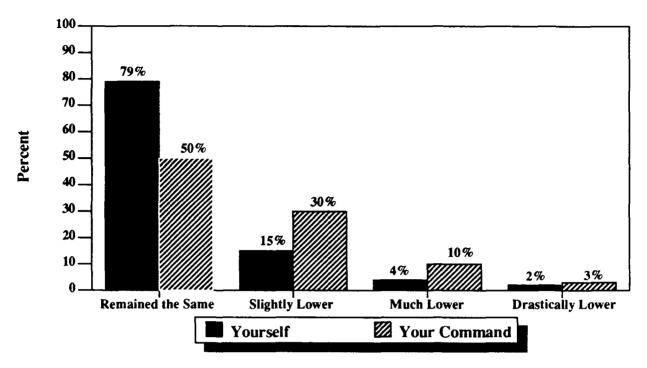


Figure 1. Effect of earthquake on performance: Military sample.

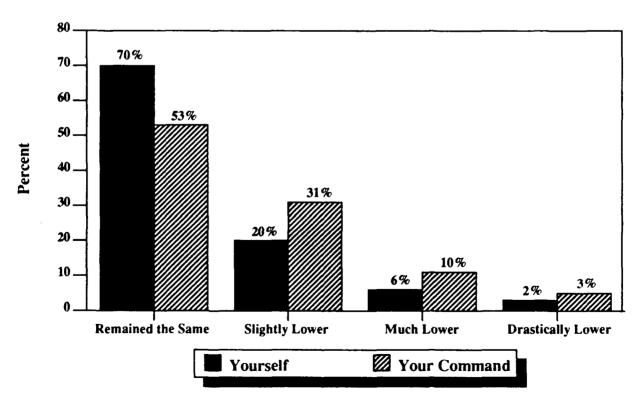


Figure 2. Effect of earthquake on morale: Military sample.

Four of the seven command leaders interviewed felt that morale in their commands was higher than normal after the earthquake. They attributed this high morale level to the fact that Navy personnel played a central role in disaster assistance operations in the area following the earthquake. Only one of the command leaders reported a lower level of morale in his command, and that only for the first day or so. When asked about the incidence of disruptive behaviors following the earthquake, none of the command leaders interviewed thought that there had been an increase in alcohol or drug abuse. One interviewee believed that there had been some increase in domestic violence problems.

Additionally, command leaders believed that there had been no earthquake-related increase in accidents or illness of command members.

# **Possible Impact on Retention**

Two items were included in the surveys to examine the possible impact of post-traumatic stress associated with the earthquake on retention. When asked if their career intentions had changed, a total of nine percent of the military respondents said that they had either definitely decided to leave the Navy or were more inclined to leave the Navy following the earthquake. Spouse respondents were asked if their satisfaction with Navy life had been affected. Twelve percent said that they were somewhat less satisfied and another 8 percent were much less satisfied with Navy life following the earthquake. The relationship between these measures and measures of stress symptoms are shown in Table 13.

# **Earthquake Preparation**

The number of spouses and military members who said that they had made earthquake preparations after the earthquake was greater than the number who said they had made such preparations before it occurred. Nevertheless, only 16 percent of each sample reported that they were now "well prepared." Seven months after the Loma Prieta Earthquake, 23 percent of the spouse sample and 46 percent of the military sample stated that they still had made no preparations for future occurrences.

# Findings from Interviews with Service Providers

Twenty-two service providers in the area were interviewed to lend depth to the survey responses and to learn about their personal experiences. Two of the providers were chaplains and the rest represented 17 agencies located at Treasure Island, Alameda, Moffett Field, and Oakland. These agencies included FSCs, Counseling and Assistance Centers (CAACs), Child Development Centers and an elementary school, Family Advocacy Representatives (FARs), medical facilities, the Red Cross, Navy Relief, and a Teen and Youth Center.

Table 13

Correlations of Stress Symptoms with Members' Career Intentions and Spouses' Satisfaction with Navy Life

	Member Intentions to Leave Navy	Spouse Disatisfaction with Navy Life
Personal symptoms at 2 weeks	.13 $(p = .000)$ $(n = 2393)$	.23 $(p = .000)$ $(n = 731)$
Personal symptoms at 7 months	.18 (p = .000) (n = 2393)	.27 (p = .000) (n = 731)
Family problems at 2 weeks	.22 (p = .000) (n = 1465)	.30 (p = .000) (n = 731)
Family problems at 7 months	.26 (p = .000) (n = 1465)	.32 (p = .000) (n = 731)
Children's symptoms at 2 weeks	.06 (p = .038) (n = 1021)	.20 (p = .000) (n = 621)
Children's symptoms at 7 months	.07	.26
	(p = .010) (n = 1021)	(p = 000) $(n = 621)$

#### Notes.

- 1. Zero-order Pearson product moment correlations.
- 2. Distributions for personal symptoms, family problems and childrens' symptoms have been corrected to approximate normal distributions.

# Overall Reactions to the Earthquake

Service providers agreed that most individuals felt afraid, confused, and helpless when the earthquake occurred, including themselves. However, they had somewhat different perceptions about reactions in the period that followed. For example, one FSC counselor said that it was 3 months before it was "business as usual" at her agency. In contrast, a CAAC counselor said that his agency was closed for a few days and then "things were pretty much back to normal." Officials at an elementary school reported losing 50 students because parents were afraid to stay in the area, but the majority of service providers reported that most adults and children had calmed down appreciably within a month. Nevertheless, the service providers continued to see problems among their clients. They reported that after 8 months many adults were still instable, had difficulty concentrating, and were prone to argue. Some children continued to have difficulty sleeping, and a reduced demand for hourly care at day care centers persisted, reflecting the parents' need to be with their children.

One of the two FARs interviewed reported an increase in child and spouse abuse, precipitated by stress and drinking, that persisted for 6 months after the earthquake. While the FAR identified new offenders as the source of the problem, a CAAC director said that individuals seen by that agency were primarily repeat offenders. A FSC director reported that drunk driving increased 2 months after the earthquake, which he interpreted to be a delayed reaction. A CAAC director felt that the earthquake had increased trust in the counselors and accelerated treatment success and that these positive effects still were occurring 6 months later.

## Individuals Most Affected by the Earthquake

The service providers reported that individuals most vulnerable to the effects of the earthquake included spouses of deployed members, individuals who had recently left home for the first time, people with special medical problems, those who were poorly educated, and mothers of small children. Also, people with pre-existing stresses (e.g., younger spouses, foreign-born spouses, families with little support) and those with a history of trauma (e.g., the abused, Vietnam veterans) were felt to be especially vulnerable.

#### **Actions and Reactions of Service Providers**

There was an overall increase in requests for services, particularly at the FSCs. In order to function effectively, it was necessary for FSC personnel to cope first with their own reactions to the earthquake. Talking with their co-workers, either informally or in group meetings, helped them to recognize their feelings and deal with emotional consequences of the disaster. Some were able to draw on past training, as the Red Cross had recently conducted a seminar on disaster and earthquake preparedness at the Treasure Island Naval Station and other individuals had attended classes on post-traumatic stress. Some personnel reported feeling shock and numbness for up to 2 weeks, while difficulties in commuting and 12-hour shifts at some of the FSCs added to the stress.

Service providers initiated numerous actions taken to meet the needs of military personnel and their families in the post-earthquake period. Through various media, they publicized available services and communicated the typical emotional consequences of natural disasters. Fliers and messages were sent overseas to help military members understand the problems facing their families at home. Numerous "rap sessions" were held to allow individuals to share their concerns, express their emotions, and receive stress management advice.

To combat the feeling of helplessness, the FSCs asked enlisted personnel to list the ways in which work centers could be made safer during earthquakes and children were encouraged to assemble survival kits that could be used in the aftermath of an earthquake.

#### **Responses of Commands**

Service providers reported that local commands provided leadership and took the necessary actions to meet basic needs after the earthquake. For example, 4,000 free meals were provided to families on Treasure Island over a period of 2 weeks. Many of the actions taken by commands in the area have been detailed in the After Action Report published by Commander, Naval Base San Francisco (1990). Equally important, base commanders and other leaders publicly expressed

their own fears and emotional reactions to the earthquake and thus helped to legitimize what others were feeling.

The After Action Report also summarizes the high level of cooperation and mutual assistance between the military and civilian communities in the Bay Area.

#### **DISCUSSION AND CONCLUSIONS**

Although the Loma Prieta earthquake was classified as non-catastrophic, it had a profound effect on many people in the Bay Area. A comprehensive account of the physical and logistical problems experienced at Navy facilities can be found in the After Action Report distributed by Commander, Naval Base San Francisco (1990), which also provides a summary of "lessons learned" that can facilitate earthquake preparation for the future. It was the intention of this report, therefore, to focus on the personal, emotional effects of the earthquake on individuals in the Navy community.

Only a small percent of the military and spouse survey respondents sustained injuries or serious damage to their property because of the earthquake, and many respondents appeared to be experiencing no stress-related symptoms. Nevertheless, 39 percent of military respondents and 61 percent of spouse respondents reported psychological and/or physical symptoms (such as sleeplessness and anxiety) that may impair functioning. In general, individuals in the spouse sample experienced more symptoms, utilized more services, and acknowledged a greater number of needs than did military respondents.

Of the services available to help Navy people cope with the aftermath of a natural disaster, the services used with the greatest frequency were those offering physical assistance, such as the PWC or, on Treasure Island, the food and other supplies provided by the command. Less than 10 percent of both samples made use of the services designed to help them deal with their emotional reactions to the disaster, such as counseling services and command-sponsored "rap groups." In fact, the number of individuals from both samples who said that such services were not available was slightly larger than the number who used them. Despite the efforts to use the various media to communicate the availability of services, it would appear that the message did not reach significant numbers. An alternative interpretation is that some military families fear that acknowledgment of emotional problems is detrimental to one's military career even under disaster circumstances.

One indication of the importance of conducting outreach initiatives is contained in the analysis of coping styles, which suggested that those who coped with stress by obtaining support from formal sources had fewer symptoms than those who relied on informal sources of support. The causal direction of the relationship between coping style and symptoms has not been determined. It may be that those who take the initiative to obtain assistance from available formal sources are those who experience less stress, or it may be that receiving formal assistance is more effective in ameliorating stress than other strategies that people use. If we assume the latter, it is important that families find out where to obtain assistance, probably through a disaster preparation program.

In general, results from spouse and member surveys supported the conclusions of the service providers concerning the individuals most at risk for experiencing post-traumatic stress symptoms. For example, both data sources indicated that spouses and children of deployed members are likely to be particularly vulnerable. Also, younger spouses among the respondents experienced more stress-related symptoms and reported children's problems of longer duration following the earthquake than those in older age brackets.

Service providers who were interviewed stressed the importance of educating the public about what they should do to prepare for future earthquakes. Such education should not be limited to safety precautions or the assembling of survival kits--important as those things are but should also inform people about what to expect emotionally, how to deal with post-traumatic stress, and the importance of seeking assistance. Members of certain high-risk groups may not participate in such disaster preparation training unless outreach efforts are directed toward them. Special attention should also be devoted to plans for helping children air their fears and anxieties, and educating their parents on ways to help the children deal with their anxieties.

Communications with dependents by service members at sea during any disaster is essential to maintain morale. Results suggested that there is room for improvement in this area. For example, 17 percent of the spouses who responded to the survey said that they needed assistance in communicating with their military spouse, but only about half of that number received assistance in this regard. Among members who were deployed when the earthquake occurred, 46 percent stated that more than 36 hours elapsed before they were able to establish communications with their families in the affected area.

Accounting for personnel and families was hampered by out-of-date recall bills and relying on the telephone system for recall of personnel did not work well in the Loma Prieta disaster. Attempts were not always made to account for the safety of dependents of those in deployed commands and met with only limited success when they were initiated. All of these findings underscore the importance of establishing lines of communication in advance and taking steps to assure that recall bills are up-to-date. Because ombudsmen play a crucial role in establishing communications between deployed commands and families, it is important that they receive training in disaster response procedures and that they have up-to-date information on how to contact families.

#### RECOMMENDATIONS

- 1. Develop and initiate disaster preparation education programs that address such topics as anticipated emotional reactions and where to obtain assistance.
  - 2. Utilize out-reach strategies to reach those in high-risk populations.
- 3. Include provisions for helping children express their fears and anxieties in disaster response plans and educating their parents in the best ways to deal with children's fears and anxieties.
  - 4. Provide command ombudsmen with recall bills that are kept up to-date by commands.
  - 5. Provide training in disaster response procedures for ombudsmen.

# REFERENCES

- Commander, Naval Base San Francisco (1990). 17 Oct 89 Loma Prieta Earthquake After Action Report (3440 Ser N3/1279). San Francisco: Author.
- Holmes, T. H. & Rahe, R. H. (1967). The social readjustment rating scale. *Journal of Psychosomatic Research*, 11, 213-218.

# APPENDIX A SURVEY QUESTIONNAIRES



# DEPARTMENT OF THE NAVY NAVY PERSONNEL RESEARCH AND DEVELOPMENT CENTER SAN DIEGO, CALIFORNIA 92152-6800

From: Commanding Officer Navy Personnel Research and Development Center

To: Navy Member

Subj: EARTHQUAKE EXPERIENCES SURVEY (SURVEY CONTROL SYMBOL 1700-11)

1. You are being asked to participate in a unique research project, which will assess the effects of the Loma Prieta earthquake on Navy members and (where applicable) their families in the Bay area. In completing the questionnaire, please try to think back several months and be as accurate as possible.

- 2. The purpose of this research is to assess the type of assistance that was available to you and (where applicable) your family, and the effectiveness of community efforts that were initiated. We are particularly interested in learning of needs that may have been unmet. The results of this research will be valuable in developing plans and policies that will help the Navy be prepared for other natural disasters.
- 3. A similar questionnaire is being sent to Navy spouses (where applicable). When possible, the responses given by a couple will be matched. For that reason and for a possible followup study, you are asked to enter your social security number. YOUR RESPONSES WILL REMAIN ENTIRELY CONFIDENTIAL, AND NO RESULTS WILL BE REPORTED ON AN INDIVIDUAL BASIS.
- 4. The questionnaire is easy to complete. Simply follow the directions throughout the questionnaire. For most items, you will check the appropriate response as the question applies to you. You may use pencil or pen. Enclose your completed questionnaire in the envelope provided, seal it, and return it to your command.
- 5. IF YOU MOVED TO THE BAY AREA AFTER THE EARTHQUAKE, YOU DO NOT NEED TO COMPLETE THIS QUESTIONNAIRE. JUST WRITE "NO" ON THE FRONT OF THE SURVEY AND RETURN IT TO YOUR COMMAND.
- 6. Thank you for taking the time to complete this questionnaire.

B. E. BACON

Captain, U. S. Navy Commanding Officer

## **Navy Personnel Research and Development Center**



San Diego, Ca. 92152 - 6800

May 1990

#### **EARTHQUAKE EXPERIENCES SURVEY**

Sponsored by NMPC-66 Commander, Naval Base San Francisco Family Service Center, Treasure Island Family Service Center, Alameda

Conducted by Navy Personnel Research and Development Center

Report Control Symbol 1700-11

Form A

#### PRIVACY ACT STATEMENT

Under the authority of 5 USC 301 regulations, you are requested to complete this questionnaire. Information furnished will be used for statistical studies to help the Navy improve policies and procedures. It will not be used for any administrative action concerning you specifically and will not be part of your permanent record. No adverse actions will be taken if you decide not to furnish this requested information.

1.	Enter your Social Security Number:	ll_	_11-111-111
2.	Enter your age at your last birthday:	<u> _ _</u>	_!
3.	What is your racial group?  Black/Afro-American  American Indian/Alaskan Nativ  Hispanic/Mexican/Latin Ameri  Oriental/Filipino/Pac.Islander  White/Caucasian  Other		4. What is your gender?  Male Female
<ol> <li>9.</li> <li>10.</li> </ol>	What is your paygrade?  E1  W1 E2  W2 E3  W3 E4  W4 E5  O1 E6  O2 E7  O3 E8  O4 E9  O5 O6  What is your marital status? Single Married Divorced/Sep. Widowed  Are you accompanied or unaccompanied at this station? Accompanied Unaccompanied	<ul><li>6.</li><li>7.</li><li>8.</li></ul>	What is your duty type?  Sea Shore Naval Air Submarine  How much formal education do you have? Check degrees or diplomas earned None High School Equivalent High School Less than 2 years college. 2 years or more of college, no degree Associate degree Bachelor's degree Master's degree Doctoral degree Professional Degree (M.D.,D.D.S., etc)  What is your dual-career status? Not married Navy spouse Military spouse (other service) Civilian spouse, employed full time Civilian spouse, unemployed
12. below,	Please indicate the number of children, and the sex of each child.	en you l	have in your household in each of the age categories
Age of	children No. of children		Sex of children CIRCLE ONE FOR
3 yrs to 6 yrs to 10 yrs 14 yrs	o 2 yrs o 5 yrs o 9 yrs to 13 yrs to 17 yrs and over		EACH CHILD IN EACH CATEGORY  m m m m f f f f  m m m m f f f f  m m m m

13.	Less than 3 months Less than 3 months 4 to 6 months Seven to 12 months 13 to 24 months 25 to 36 months More than 36 month	·	a?		
14.	At the time of the earthquake, wh  Military housing, Tr.  Military housing, N.  Military housing, N.  Military housing, Ha  Military housing, Po  Off base in civilian h	easure Island AS Alameda SC Oakland amilton AFB int Mulati	ving?		
15. eartho	Had you had past experience(s) v quake in San Francisco?  No Yes	vith earthquakes	or other majo	r natural disasters be	efore the recent
16.	Did you or any member of your f	amily suffer phy	ysical injury as	a result of the earth	quake?
		Yourself	Spouse	A Child	
	No injury Minor injury Major injury	<u> </u>			
17.	Did the earthquake cause propert  No damage to reside  Minor damage to res  Major damage to res  Residence was destre	nce idence idence	ur residence an	d how extensive wa	s it?
18.	Did the earthquake cause damage	to your importa	ant personal pr	operty, such as hous	sehold
Turnis	hings or automobiles?  No damage to persor  Minor damage to per  Major damage to per  Personal property wa	sonal property			
19. ALL	At your residence, were you with IHAT APPLY.  Electricity Natural gas Telephone Water No	out any of the fo	ollowing service	es after the earthqua	ake? CHECK
20. W	Vere you deployed at the time of the	e earthquake?			
	Yes>IF		R THE NEXT		

	21. How many weeks had you been deployed before the earthquake struck?  Less than 4 weeks  4 to 8 weeks  9 to 12 weeks  13 to 16 weeks  17 to 20 weeks  21 to 24 weeks  More than 24 weeks
	22. How many hours elapsed before your were able to establish communications with your family?  Less than 3 hours 3 to 6 hours 7 to 12 hours 13 to 24 hours 25 to 36 hours More than 36 hours
In the following section, please ind earthquake struck.	23. How long after the earthquake did you return from your deployment?  Less than 2 weeks 2 to 4 weeks 5 to 8 weeks 9 to 12 weeks 13 to 16 weeks 17 to 20 weeks 17 to 20 weeks
24. Yourself	25. Your Spouse
At home On-base At work Aboard ship On duty, but off station Other	At home At work Aboard ship In your neighborhood In the urban area (but not at work) Other
26. Oldest Child	27. Next Oldest 28. Next Oldest
At home At school At child care With a friend/ relative At his/her job Playground or rec center Other	At home At school At school At child care With a friend/ relative At his/her job Playground or rec center Other  At home At home At child care With a friend/ relative At his/her job Playground or rec center Other  At home At home At home At home At school At child care With a friend/ relative relative  relative Other Other

	29. Next Oldest	30. Next Oldest	31. Next Oldest
	At home At school At child care With a friend/ relative At his/her job Playground or rec center Other	At home At school At child care With a friend/ relative At his/her job Playground or rec center Other	At home At school At child care With a friend/             relative At his/her job Playground or             rec center Other
32. immed	liate family were safe?  Less than 1 hours 1 - 3 hours 4 - 6 hours 7 - 12 hours 13 - 24 hours 25 - 36 hours More than 36 hours I do not have a second control of the con	r	le to determine that all members of your
33.	Less than 1 hou 1 - 2 hours 3 - 4 hours 5 - 8 hours More than 8 hou I do not have a second	r	old members were all at home together?  y me to this station
34. parts o	How soon after the earthquainf the country?	ke were you able to communi	cate with your extended family in other
	Less than 3 hours 3 to 6 hours 7 to 12 hours 13 to 24 hours 25 to 36 hours More than 36 ho		
35.	Was the normal mode of training Yes, for me  Yes, for my spo  Yes, for both my No	use	disrupted for you or your spouse?
36.	Close, intimate Friends with wh	ele you normally interact with friends you can call upon for some you share social occasion borhood and work acquaintance	support s but not intimacies

37. Do you have relatives in the Bay a Yes No	rea?						
38. Immediately after the earthquake of On the base?  In your community Elsewhere in the community None of the above	y? ity?	ou parti	cipate in res	cue activiti	es		
This section concerns the services the We would like you to indicate from t your level of satisfaction with each se	he lis	t belov	lable to peo v which serv	ple in the a vices you ar	irea aft nd/or y	er the ea our fami	rthquake. ly used, and
	<u>Used</u>	Not <u>Used</u>	Not <u>Available</u>	Very <u>Satisfied</u>	Satisfied	Dissatisfied	Very <u>Dissatisfied</u>
39. Rap workshops for family members							
40. Emergency food/supplies from command						<del></del>	
41. Family Service Center					_		_
Information & Referral							
42. Red Cross		_					
43. Family Service Center counseling services			_				<del></del>
44. Federal Emergency						_	
Management Agency							
45. Navy Relief	_						<del></del>
46. Structured activities for school-age children						******	
47. Emergency supplies from other sources							
48. Chaplains							
49. Church relief agencies				<del></del>	_		
50. Psychological services from other commands (e.g., Letterman Hospital)				<del></del>			_
51. Ombudsmen Network	_	~~~	<del></del>				
52. Stress management workshops							
53. City agencies							
54. County agencies				_			_
55. Base Security							_
56. Fire Department							

57. Public Works Center

Please tell us about needs you and/or your family had during the post-quake period, and if you were able to obtain the assistance you needed. CHECK ALL THAT APPLY FROM THE LIST BELOW, AND WRITE IN ANY THAT AREN'T ON THE LIST.

	Need		Obtained Assistance	
58.		Someone to talk to		
<b>5</b> 9.		Assistance in cleaning up damage at home		
60.		Assistance with home repair		
61.		<b></b>		
62.		Assistance in communicating with my spouse	<del></del>	
63.		Child care		
64.			<del></del>	
65.				
		· ·	<del></del>	
66.		Personal counseling	<del></del>	
67.		Family or marital counseling		
68.				
69.		Other:		
<b>70</b> .		Other:	<del></del>	
<b>7</b> 1.		Other:		
perio	od. CH	nd indicate which coping strategies you and/or your family ECK ALL THAT APPLY, THEN USE THE COLUMN O STRATEGY THAT WORKED BEST.	N THE RIGHT TO CHE	CK
72.		Left the area for a while		
<b>73</b> .		Turned to friends for help and support		
74.		7 1 11		
<b>75</b> .		•		
76.		Attended church services		
<i>7</i> 7.		Watched television/listened to the radio	1.1	
78.			nappen".	
79. 80.	<del></del>	Sought advice from relatives Asked neighbors for favors and assistance		
81.		Helped others with quake damage		
82.		Restricted family conversation to other, normal things		
83.		Spent much more time together as a family		
84.		Partied with friends to help forget		
<b>85</b> .		Sought professional counseling help		
86.		Sought assistance from agencies and programs designed to he	elp in this situation.	
<b>87</b> .		Sought information and advice from family doctor		
88.		Made preparations for future earthquakes.		

earthquake?	y days were you un	nable to report for duty due to pro	odlems associated with the
	None, on duty e	verv dav	
	_ 1 day	5 days	
	_ 2 days _ 3 days	6 days 7 days	
i	_ 4 days	More than 7 days	
90. How do v	on think etrees asso	visted with the earthquake affect	ed job performance and productivity
for yourself and in		ciated with the entirequine arrect	see job performance and productivity
TOT YOUISCIT AND I	i your command:		
Yourself			Your Command
-A-MANNAA			A VIII. VOIMMINI
-	Performance/	productivity remained the same	
	Performance/	productivity were slightly lower	<del></del>
	Performance/	productivity were much lower	
	Performance/j	productivity were drastically low	er
91. How do yo command?	ou think stress asso	ociated with the earthquake affect	ed your morale and morale in the
Yo	our Morale	C	ommand Morale
_	Moral	e was unchanged	
_	Moral	e was slightly lower	
_	Moral	e was much lower	
_	Moral	e was drastically lower	
92. Did the ea	rthquake and the e	vents surrounding it have any effo	ect on your career intentions?
	_ My career plans	are unchanged	
	_ Since the earthqu	uake, I am more inclined to separ	ate from the Navy
	_ Since the earthqu	uake, I have definitely decided to	separate from the Navy
the stressful period	d after the earthqua		your fellow command members in
	_ Yes _ Possibly		
	No		

94.	Did you find that you were experiencing me Yes Possibly No	ore conflicts with your supervisor	after the earthquake?
95.	Did you find that you were more accident p  Yes Possibly No	rone in the period after the earthq	uake?
96. earth	Did you feel that your command leaders we quake?  Yes Somewhat No	ere supportive during the stressful	period following the
	97. IF YE their support?	Modifying leave policy Relaxing demands Providing information about Increasing communication Other:	ut services s
comr	-traumatic stress can show up in a variety o mon symptoms is presented below. Please o weeks after the earthquake, and those that y	heck those that you experienced	d during the first
		At 2 weeks	Now
98.	Difficulty falling asleep	-	
<b>99</b> .	Crying for no reason at all		
100.	Trouble remembering things		
101.	Difficulty sleeping through the night	<del></del>	
102.	Difficulty concentrating		<del></del>
103.	Loss of appetite	<del></del>	
104.	Weight loss	***	<del></del>
105.	Nightmares		
106.	Feeling "numb", unable to relate to others		
107.	Nervous laughter		<del></del>
108.	Feeling anxious all the time		
109.	Feeling lethargic or apathetic		
110.	Excessive fatigue	<del></del>	
111.	Large weight gain		
112.	Digestive problems		

113.	Decreased sexual desire		
114.	Anxious when separated from spouse or family		
115.	Short-tempered at work	_	
116.	Short-tempered with family		
117.	Feeling angry much of the time		
118.	Feeling guilty because others were hurt more		
119.	Shunning other people, staying away from social gatherings		
120.	Feeling punished for something you didn't do		
121.	Fearful of returning to certain places		
122.	Feeling that you don't trust other people		
123.	Feeling threatened by forces beyond your control		
124.	Not knowing what to do next.		

## IF YOU ARE SINGLE AND DO NOT HAVE CHILDREN LIVING WITH YOU, SKIP TO ITEM 151.

Children often react to fearful or stressful experiences with an increase in problem behaviors such as those listed below. We are interested in changes in behavior that have occurred following the earthquake and may still be occurring. Please check any of the following that apply to any child in your household.

		First 2 weeks	Now
125.	Frequent nightmares	_	**********
<b>12</b> 6.	Bedwetting	-	
127	Eating problems		
128.	Refusing to sleep in own bed		
129.	Aggressive behaviors		
<b>130</b> .	Thumbsucking		
131.	Refusing to leave caretaker's side	_	
132.	Poor school performance		
133.	Withdrawn, passive		
134.	Crying		~
135.	Difficulty getting along with friends		
136.	Difficulty sleeping		
137.	Refusing to go to school		
138.	Tantrums		
139.	Physical complaints (e.g., stomach aches, headaches)		
140.	Frequent illnesses		
141.	Difficulty getting along with family.		

We are interested in learning how the stresses associated with the earthquake may have affected the way your family functioned during the first two weeks and at this time. Please complete the inventory below. CHECK ALL THAT APPLY FOR BOTH TIME PERIODS.

		First 2 Weeks	Now
142.	A family member appears to depend on alcohol or drugs		
143.	A family member appears to have emotional problems		
144.	There is an increase in conflicts between husband and wife		
145.	Increased arguments between parents and children		
146.	An increase in the number of problems or issues which don't get resolved	***************************************	
147.	Physical and/or psychological violence in the home		
148.	Increased difficulty with sexual relationship between husband and wi	fe	
149.	Increased arguments among siblings		
150.	Spouse is less supportive of Navy career		
	Before the earthquake, had you and/or your family made the recommer	nded prepar	ations for
an ear	rthquake?  Yes, well prepared  Had made some preparations  No		
	Following the earthquake, have you and/or your family implemented the rations for an earthquake?  Yes, well prepared Have made some preparations No	e recomme	ended
	After your recent experiences, are you more or less concerned or frighten puakes in the area?  More concerned and frightened About the same Less concerned and frightened	ened about	future

IN THIS LAST SECTION, PLEASE INDICATE HOW MANY OF THE EVENTS LISTED, BOTH HAPPY AND SAD, HAVE OCCURRED IN YOUR LIFE IN THE PAST YEAR. CHECK ALL THAT APPLY.

155.		Death of spouse
156.		Divorce
157.		Marital separation
158.		Breakup of intimate relationship
159.		Birth of a child
160.		Getting married
161.		Relocation
162.		Spouse beginning or ceasing work outside the home
163.		Change in work responsibilities
164.		Major personal injury or illness - you or a family member
165.		Death of a close friend
166.		Death of a close family member
167.		Trouble with in-laws
168.		An outstanding achievement
169.		Sexual difficulties
170.		Trouble with the authorities
171.		Purchasing a home
172.		Major change in your financial state
173.		Son or daughter leaving home
174.		Reconcilation with spouse
175.		Death of a pet
		#*#*#*#*#*#*#*#*#*#*#*#*#*#*#*#*#*#*#*
into p	ost-car	niversity researchers have received permission to conduct a second phase of research thouake stress in the military community in the Bay area. Your participation can able contribution to this important research.
If you securi	are w	illing to participate, please sign below and enter your phone number and social ober. As in the survey just completed, your confidentiality will be protected.
Yes, I	am w	illing to participate in Phase 2 of this research.
		Date:
Name	;	
Telen	hone	SSN 1 1 1 1-1 1 1 1 1 1 1

### **Navy Personnel Research and Development Center**



San Diego, Ca. 92152 - 6800

May 1990

#### EARTHQUAKE EXPERIENCES SURVEY

Sponsored by
NMPC-66
Commander, Naval Base San Francisco
Family Service Center, Treasure Island
Family Service Center, Alameda

Conducted by Navy Personnel Research and Development Center

Report Control Symbol 1700-11 Form B

#### PRIVACY ACT STATEMENT

Under the authority of 5 USC 301 regulations, you are requested to complete this questionnaire. Information furnished will be used for statistical studies to help the Navy improve policies and procedures. It will not be used for any administrative action concerning you specifically and will not be part of your permanent record. No adverse actions will be taken if you decide not to furnish this requested information.

1.	Sponsor's Social Security Number: ll_	_ll-ll-llll	
COMI SPON	PLETE ITEMS 2 THROUGH 8 WITH IN SOR.	FORMATION ABOUT YOURSELF, N	OT YOUR
2.	Enter your age at your last birthday: 11	1	
3.	What is your racial group?  Black/Afro-American  American Indian/Alaskan Native  Hispanic/Mexican/Latin American  Oriental/Filipino/Pac.Islander  White/Caucasian  Other	4. How much formal education d  Check degrees or diplomas ear  None High School Equivalent High School Less than 2 years college 2 years or more college, r Associate degree  Bachelor's degree	ned
<b>5</b> .	What is your gender?  Male Female	Associate degree Bachelor's degree Master's degree Doctoral degree Professional degree (M.D.	o.,D.D.S.,etc
6.	What is your dual career status?  Navy member	8. What is your paygrade? E1 W1	MBER, NOT M 9.
7.	Enter your command UIC: l_l_l_l_l_l	E2	
9. below,	Please indicate the number of children you hand the sex of each child.	ave in your household in each of the age	categories
	Age of children No. of children	Sex of children. CIRCLE ONE FOR EACH CHILD IN EACH CAT	EGORY
	Birth to 2 yrs 3 yrs to 5 yrs 6 yrs to 9 yrs 10 yrs to 13 yrs 14 yrs to 17 yrs 18 yrs and over	m m m m f f f f m m m m f f f f m m m m	

10.		Less the description of the Less the Less the description of the Less the Le		ns			
11.		_ Militai _ Militai _ Militai	ry housing, ' ry housing, l ry housing, l	where were you li Treasure Island NAS Alameda NSC Oakland Hamilton AFB Point Mulati n housing	ving?		
12. earthq	uake in San	ad past ex Francisco No Yes	kperience(s) o?	with earthquake	s or other majo	τ natural disasters	before the recent
13.	Did you o	r any men	nber of your	family suffer ph	ysical injury as	s a result of the ea	rthquake?
				Yourself	<b>Spouse</b>	A Child	
	Mi	injury nor injury ijor injury			_		
14.		_ No dan _ Minor o _ Major o	cause proper nage to resid damage to re damage to re nce was des	dence esidence esidence	ur residence an	d how extensive v	was it?
15.	Did the ear	rthquake o	cause damag	ge to your import	ant personal pr	operty, such as ho	ousehold
iumisr	nings or auto	No dan Minor o Major o	nage to pers damage to p damage to p	onal property ersonal property ersonal property was destroyed.			
16. ALL T	THAT ADDI	sidence, w LY. Electric Natural Telepho Water No	ity gas	thout any of the f	ollowing servi	ces after the eartho	quake? CHECK
17. W	as your spo	use deploy	yed at the tir	me of the earthqu	ake?		
		Yes	IF YES, A	NSWER THE I	NEXT 3 ITEM ITEM 21:	<b>1</b> S.	

	deployed before the earthquake struck?  Less than 4 weeks  4 to 8 weeks  9 to 12 weeks  13 to 16 weeks  17 to 20 weeks  21 to 24 weeks  More than 24 weeks
	19. How many hours elapsed before your spouse was able to establish communications with you?  Less than 3 hours 3 to 6 hours 7 to 12 hours 13 to 24 hours 25 to 36 hours More than 36 hours
In the following section, please ind earthquake struck.	20. How long after the earthquake did he/she return from deployment?  Less than 2 weeks 2 to 4 weeks 5 to 8 weeks 9 to 12 weeks 13 to 16 weeks 17 to 20 weeks 17 to 20 weeks
21. Your Spouse	22. Yourself
<ul> <li>At home</li> <li>On-base</li> <li>At work</li> <li>Aboard ship</li> <li>On duty, but off station</li> <li>Other</li> </ul>	At home At work Aboard ship In your neighborhood In the urban area (but not at work) Other
23. Oldest Child	24. Next Oldest 25. Next Oldest
At home At school At child care With a friend/ relative At his/her job Playground or rec center Other	At home At home At school At school At child care At child care With a friend/ With a friend/ relative relative At his/her job At his/her job Playground or rec center Other Other

18. How many weeks had he/she been

26. Next Oldest	27. Next Oldest	28. Next Oldest
At home  At school  At child care  With a friend/  relative  At his/her job  Playground or  rec center  Other	At home At school At child care With a friend/ relative At his/her job Playground or rec center Other	At home At school At child care With a friend/ relative At his/her job Playground or rec center Other
immediate family were safe?  Less tha  1 - 3 hou  4 - 6 hou  7 - 12 hou  13 - 24 hou  25 - 36 hou	n 1 hour urs urs ours nours	e able to determine that all members of your
Less tha 1 - 2 hou 3 - 4 hou 5 - 8 hou	n 1 hour ars ars	usehold members were all at home together?
31. How soon after the earparts of the country?	rthquake were you able to comn	nunicate with your extended family in other
Less tha	ours hours	
Yes, for Yes, for	me	ork disrupted for you or your spouse?
Close, in Friends v	te people you normally interact we timate friends you can call upon with whom you share social occay neighborhood and work acquait	for support asions but not intimacies

34.	Do you h	ave re	latives in Yes No	the Ba	ay area?		
35.	Immediat		er the ea On the b In your c Elsewhe None of	ase? commu re in th	nity? ne city?	i participate in re	escue activities
<b></b>							

This section concerns the services which were available to people in the area after the earthquake. We would like you to indicate from the list below which services you and/or your family used, and your level of satisfaction with each service used.

	<u>Used</u>	Not <u>Used</u>	Not <u>Available</u>	Very <u>Satisfied</u>	Satisfied	Dissatisfied	Very <u>Dissatisfied</u>
36. Rap workshops for family members							
37. Emergency food/supplies from command				_			
38. Family Service Center	_					<del></del>	
Information & Referral							
39. Red Cross							
40. Family Service Center				-			
counseling services							
41. Federal Emergency							
Management Agency							
42, Navy Relief			_				
43. Structured activities for school-age	_						
children							
44. Emergency supplies from other sources					<del></del>	<del></del>	
45. Chaplains						-	
46. Church relief agencies							
47. Psychological services from other							
commands (e.g., Letterman Hospital)							
48. Ombudsmen Network					_		
49. Stress management workshops							-
50. City agencies							
51. County agencies							
52. Base Security							
53. Fire Department				_			
54. Public Works Center							_

Please tell us about needs you and/or your family had during the post-quake period and if you were able to obtain the assistance you needed. CHECK ALL THAT APPLY FROM THE LIST BELOW AND WRITE IN ANY THAT AREN'T ON THE LIST.

	Nee	<u>ded</u> <u>Ob</u>	tained Assistance	
55.		Someone to talk to		
<b>5</b> 6.		Assistance in cleaning up damage at home		
<b>57</b> .		Assistance with home repair		
58.				
<b>5</b> 9.			<del></del>	
60.				
61.				
		Therapy for children		
62.		Temporary financial assistance		
<b>63</b> .		Personal counseling		
64.		Family or marital counseling		
65.		Other:	<u></u>	
66.		Other:		
67.		Other:		
68.		Other:		
perio	od. CH	nd indicate which coping sategies you and/or your family us IECK ALL THAT APPLY, THEN USE THE COLUMN ON STRATEGY THAT WORKED BEST.	THE RIGHT TO	CHECK
<b>6</b> 9.		Left the area for a while		
<b>7</b> 0.		Turned to friends for help and support		
71.		Turned to extended family for help and support		
72.		Talked within the family about the earthquake		
73.		Attended church services		
74.		Watched television		
75.		Adopted a fatalistic attitude"whatever's going to happen will h	appen.	
76. 77.		Sought advice from relatives Asked neighbors for favors and assistance		
77. 78.		Helped others with quake damage		
79.		Restricted family conversation to other, normal things		
80.		Spent much more time together as a family		
81.		Partied with friends to help forget		
<b>82</b> .		Sought professional counseling help		
<b>83</b> .		Sought assistance from agencies and programs designed to help	in this situation.	
84.		Sought information and advice from family doctor		-
<b>85</b> .		Made preparations for future earthquakes.		

86. If you are employed, how many days were you unabl with the earthquake?	e to go to work due to pr	oblems associated
1 day 6 days		
2 days 7 days		
None 5 days 1 day 6 days 2 days 7 days 3 days More than 7 days 4 days Not applicable		
87. If you are employed, did you find that you were experworkers in the stressful period after the earthquake?  Yes		vith your fellow
Possibly No Not applicable		
88. If you are employed, did you find that you were experafter the earthquake?	riencing more conflicts v	vith your supervisor
Yes Possibly		
Yes Possibly No Not applicable		
Not applicable		
89. Did the earthquake and the events surrounding it have life?	any effect on your satis	faction with Navy
My satisfaction with Navy life has not cl	nanged	
Since the earthquake, I am somewhat les	s satisfied with Navy life	2
Since the earthquake, I am much less sat	isfied with Navy life.	
90. Did you find that you were more accident prone in the Yes Possibly No  Post-traumatic stress can show up in a variety of physical common symptoms is presented below. Please check those two weeks after the earthquake, and those that you are ex	and psychological symethat you experienced	ptoms. A list of during the first
	At 2 weeks	Now
91. Difficulty falling asleep		
92. Crying for no reason at all		-
93. Trouble remembering things	<del></del>	
94. Difficulty sleeping through the night		
95. Difficulty concentrating		<del></del>
96. Loss of appetite		<del></del>
97. Weight loss		
98. Nightmares	<del></del>	<del></del>
99. Feeling "numb", unable to relate to others		
100. Nervous laughter		
101. Feeling anxious all the time		_
coming anxious an are time		

102.	Feeling lethargic or apathetic		
103.	Excessive fatigue	-	
104.	Large weight gain		
105.	Digestive problems		
106.	Decreased sexual desire		
107.	Anxious when separated from spouse or family		
108.	Short-tempered at work		
109.	Short-tempered with family	<del></del>	
110.	Feeling angry much of the time	<del></del>	
	Feeling guilty because others were hurt more		
	Shunning other people, staying away from social gatherings	<del></del>	
	Feeling punished for something you didn't do	<del></del>	
	Fearful of returning to certain places		
	Feeling that you don't trust other people		
	Feeling threatened by forces beyond your control	<del></del>	
	Not knowing what to do next.		
<b>4 4</b> / .	THE MICHING WHAT TO GO HEAT.		<del></del>

#### IF YOU DO NOT HAVE CHILDREN LIVING WITH YOU, SKIP TO ITEM 135.

Children often react to fearful or stressful experiences with an increase in problem behaviors such as those listed below. We are interested in changes in behavior that have occurred following the earthquake and may still be occurring. Please check any of the following that apply to any child in your household.

		First 2 weeks	<u>Now</u>
118.	Frequent nightmares		
119.	Bedwetting		
120.	Eating problems		
121	Refusing to sleep in own bed		
122.	Aggressive behaviors		
123.	Thumbsucking		
124.	Refusing to leave caretaker's side		
125.	Poor school performance		
<b>126</b> .	Withdrawn, passive		
<b>127</b> .	Crying		<del></del>
128.	Difficulty getting along with friends	<del></del>	
129.	Difficulty sleeping		<del></del>
130.	Refusing to go to school		
131.	Tantrums		
132.	Physical complaints (e.g., stomach aches, headaches)		
133.	Frequent illnesses		
134.	Difficulty getting along with family.		
A = 7 1 1 1	Difficulty beating mong with faithly.		

We are interested in learning how the stresses associated with the earthquake may have affected the way your family functioned during the first two weeks and at this time. Please complete the inventory below. CHECK ALL THAT APPLY FOR BOTH TIME PERIODS.

		First 2 Weeks	Now
135.	A family member appears to depend on alcohol or drugs		
136.	A family member appears to have emotional problems		
137.	There is an increase in conflicts between husband and wife		<del></del>
138.	Increased arguments between parents and children		
139.	An increase in the number of problems or issues which don't		
	get resolved		
140.	Physical and/or psychological violence in the home		
141.	Increased difficulty with sexual relationship between husband and w	rife	
142.	Increased arguments among siblings	<del></del> -	
143.	Spouse is less supportive of members's Navy career		
earthqu	Yes No  Before the earthquake, had you and/or your family made the recomme		
146. F for an	Collowing the earthquake, have you and/or your family implemented to earthquake?  Yes, well prepared Have made some preparations No	the recommended	pr <del>e</del> parations
	After your recent experiences, are you more or less concerned or fright uakes in the area?  More concerned and frightened About the same Less concerned and frightened	itened about future	

IN THIS LAST SECTION, PLEASE INDICATE HOW MANY OF THE EVENTS LISTED, BOTH HAPPY AND SAD, HAVE OCCURRED IN YOUR LIFE IN THE PAST YEAR. CHECK ALL THAT APPLY.

148.		Death of spouse
149.		Divorce
150.		Marital separation
151.		Breakup of intimate relationship
152.		Birth of a child
153.		Getting married
154.		Relocation
155.		Spouse beginning or ceasing work outside the home
156.		Change in work responsibilities
157.		Major personal injury or illness - you or a family member
158.		Death of a close friend
159.		Death of a close family member
160.		Trouble with in-laws
161.		An outstanding achievement
162.		Sexual difficulties
163.		Trouble with the authorities
164.		Purchasing a home
165.		Major change in your financial state
166.		Son or daughter leaving home
167.		Reconcilation with spouse
168.		Death of a pet
		#*#*#*#*#*#*#*#*#*#*#*#*#*#*#*#
into po	ost-eari	iversity researchers have received permission to conduct a second phase of research hquake stress in the military community in the Bay area. Your participation can ble contribution to this important research.
If you securit	are wi	lling to participate, please sign below and enter your phone number and social ber. As in the survey just completed, your confidentiality will be protected.
Yes, I	am wi	lling to participate in Phase 2 of this research.
		Date:
Name		
Teleph	one _	SSN 111-11-111

# APPENDIX B SUPPLEMENTAL TABLES

Table B-1

Rotated Factor Matrix of Coping Strategies--Military Sample Principal Components Analysis with Varimax Rotation

Coping Strategy	Factor 1	Factor 2	Factor 3	Factor 4
Support from Formal Sources				
Sought advice from family doctor	.80			
Sought professional counseling	.75			
Sought assistance from agencies, programs	.67			
Restricted family conversation to other	.66			
Asked neighbors for assistance	.50		.30	
Active/Self-Sufficient				
Talked within the family about earthquake		.74		
Watched television		.68		
Made preparations for future earthquakes		.68		
Spent much more time together as family		.58		
Helped others with quake damage		.47		
Attended church services		.34		
Support from Informal Sources				
Turned to friends			.77	
Turned to extended family			.74	
Left area for awhile			.50	
Sought advice from relatives	.35		.42	
Avoidance				
Adopted fatalistic attitude				.73
Partied with friends to forget				.71

Note. Coefficients less than .30 have been suppressed.

Table B-2

Rotated Factor Matrix of Coping Strategies--Spouse Sample Principal Components Analysis with Varimax Rotation

Coping Strategy	Factor 1	Factor 2	Factor 3	Factor 4
Support from Informal Sources				
Turned to extended family	.72			
Turned to friends	.61			
Sought advice from relatives	.58			
Asked neighbors for assistance	.52			
Left area for awhile	.46			
Active/Self-Sufficient				
Made preparations for future earthquakes		.61		
Talked within the family about earthquake		.61		
Spent much more time together as family		.52		
Attended church services		.46	33	
Helped others with quake damage		.35		
Support from Formal Sources				
Sought advice from family doctor			.67	
Sought professional counseling			.63	
Sought assistance from agencies, programs	.30		.53	
Avoidance				
Adopted fatalistic attitude				.70
Partied with friends to forget				.56
Watched television				.41

Notes. Coefficients less than 30 have been suppressed.

Table B-3

Disruption of Utilities Service by Housing Area as Reported by Military and Spouse Respondents

Housing Area	Elex	ctricity	ity Gas		s Phone		Water	
	Spouse	Member	Spouse	Member	Spouse	Member	Spouse	Member
	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)
Treasure Island	78	67	93	69	25	27	87	75
NAS, Aiameda	82	60	51	26	66	37	56	61
NSC, Oakland	78	25	100	16	22	27	67	16
Hamilton AFB	9	13	14	22	12	12	0	4
Point Mulati	90	71	0	0	40	29	10	14
Civilian Housing	55	44	11	15	47	42	17	12

Table B-4

Analysis of Variance Summary:
Marital Status, Parental Status and Deployment
Effects on Number of Personal Symptoms: Military Sample

Source of Variation	Mean Square	DF	F	Sig of F
	At Two Wee	eks		
Main Effects				
Marital Status	94.36	2	12.47	.000
Parental Category	12.91	1	1.71	.192
Deployment	217.25	1	28.70	.000
2-Way Interactions				
Marital x Parental	13.52	2	1.79	.168
Marital x Deployment	17.52	2	2.31	.099
Parental x Deployment	12.48	1	1.65	.199
3-Way Interaction				
Parental x Marital x Deployment	5.75	2	.76	.468
Residual (Error)	7.57	2444		
	At Seven Mo	nths		
Main Effects				
Marital Status	2.86	2	.63	.534
Parental Category	.36	1	.08	.779
Deployment	77.35	1	16.98	.000
2-Way Interactions				
Marital x Parental	.26	2	.06	.944
Marital x Deployment	.88	2	.19	.824
Parental x Deployment	3.98	1	.87	.350
3-Way Interaction				
Parental x Marital x Deployment	1.08	2	.24	.788
Residual (Error)	4.55	2444		

Table B-5

Analysis of Variance Summary:
Deployment and Parental Effects on
Number of Personal Symptoms--Spouse Sample

Source of Variation	Mean Square	DF	F	Sig of F
	At Two Wee	ks		
Main Effect				
Military Spouse Deployment	252.73	1	32.49	.000
Parental Category	12.09	1	1.56	.213
Interaction				
Deployment x Parental	.00	1	.00	.995
Residual (Error)	7.78	771		
	At Seven Mon	ths		
Main Effects				
Military Spouse Deployment	140.22	1	17.72	.000
Parental Category	6.77	1	.85	.355
Interacuon				
Deployment x Parental	10.72	1	1.35	.245
Residual (Error)	7.91	771		

Table B-6
Coping Styles Employed by Military and Spouse Marital and Parental Groups

	Coping Style				
Group	Formal Support (%)	Active/ Self-Sufficient (%)	Informal Support (%)	Avoidance (%)	
	Military S	ample			
Single, no children	46	9	17	28	
Single, with children	60	12	9	19	
Married, no children	30	29	17	24	
Married, with children	30	41	14	15	
Divorced/separated, no children	32	19	15	34	
Divorced/separated, with children	28	35	9	28	
Total Military Sample	37	25	15	23	
	Spouse Sa	ample			
No children, member not deployed	23	23	21	33	
No children, member deployed	19	23	29	29	
Children, member not deployed	22	35	19	24	
Children, member deployed	23	25	28	24	
Total Spouse Sample	22	31	22	25	

Table B-7

Analysis of Variance Summary:
Coping Style and Marital/Parental Group Effects
on Number of Personal Symptoms--Military Sample

Source of Variation	Mean Square	DF	F	Sig of F
	At Two Wee	eks		
Main Effects				
Coping Style	661.71	3	95.69	.000
Marital/parental group	18.71	5	2.71	.019
Interaction				
Group x Coping Style	12.28	15	1.78	.033
Residual (Error)	7.76	2480		
	At Seven Mo	nths		
Main Effects				
Coping Style	110.66	3	25.06	.000
Marital/parental group	.59	5	.13	.984
Interaction				
Group x Coping Style	7.67	15	1.74	.038
Residual (Error)	4.42	2480		

Table B-8

Analysis of Variance Summary:
Coping Style and Parental/Deployment Group
Effects on Number of Personal Symptoms--Spouse Sample

Source of Variation	Mean Square	DF	F	Sig of F
	At Two Wee	ks		
Main Effects				
Coping Style	141.18	3	19.59	.000
Parental/deployed group*	77.31	3	10.73	.000
Interaction				
Group x Coping Style	15.50	9	2.15	.024
Residual (Error)	7.21	757		
	At Seven Mor	nths		
Main Effects				
Coping Style	63.11	3	8.13	.000
Parental/deployed group*	48.30	3	6.27	.000
Interaction				
Group x Coping Style	3.42	9	.44	.913
Residual (Error)	7.76	757		

<sup>\*</sup>Groups = Children/No Children by Spouse Deployed/Not Deployed.

Table B-9

Analysis of Variance Summary:
Coping Style and Marital/Parental
Group Effects on Family Problems--Military Sample

Source of Variation	Mean Square	DF	F	Sig of F
	At Two Wee	ks		
Main Effects				
Coping Style	33.48	3	10.04	.000
Marital/parental group	11.06	4	3.32	.010
Interaction				
Group x Coping Style	1.67	12	.50	.915
Residual (Error)	3.34	1513		
	At Seven Mo	nths	<del></del>	
Main Effects				
Coping Style	11.50	3	4.80	.002
Marital/parental group	5.20	4	2.17	.070
Interaction				
Group x Coping Style	.92	12	.38	.970
Residual (Error)	2.39	1513		

#### Notes.

- 1. Single (never married) members without children excluded from this analysis.
- 2. Distributions for family problems have been corrected to approximate normal distributions.

Table B-10

Analysis of Variance Summary:
Coping Style and Parenta!/Deployment
Group Effects on Family Problems--Spouse Sample

Source of Variation	Mean Square	DF	F	Sig of F
	At Two Wee	ks		
Main Effects				
Coping Style	27.47	3	5.66	.001
Parental/deployed group*	21.41	3	4.41	.004
Interaction				
Group x Coping Style	6.81	9	1.40	.182
Residual (Error)	4.85	757		
	At Seven Mon	ths		
Main Effects				
Coping Style	1.26	3	2.20	.086
Parental/deployed group*	5.55	3	9.75	.000
Interaction				
Group x Coping Style	.92	9	1.61	.107
Residual (Error)	.57	757		

<sup>\*</sup>Groups = Children/No Children by Spouse Deployed/Not Deployed.

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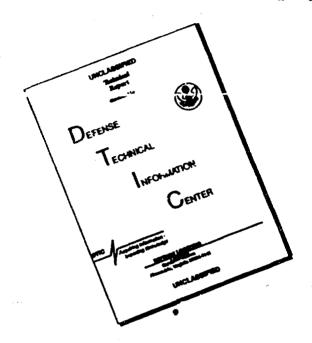
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